

**LEGISLATIVE SERVICES AGENCY  
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS**

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**FISCAL IMPACT STATEMENT**

**LS 6527**

**BILL NUMBER:** HB 1328

**NOTE PREPARED:** Feb 25, 2013

**BILL AMENDED:** Feb 20, 2013

**SUBJECT:** School Health Care Clinic Pilot Project.

**FIRST AUTHOR:** Rep. Brown T

**FIRST SPONSOR:** Sen. Patricia Miller

**BILL STATUS:** As Passed House

**FUNDS AFFECTED:** X **GENERAL**  
**DEDICATED**  
**FEDERAL**

**IMPACT:** State

**Summary of Legislation:** (Amended) This bill requires the Office of the Secretary of Family and Social Services (FSSA) to develop and implement a pilot project to establish a health care clinic located in an elementary school or high school to provide health care to students and the students' families. The bill specifies certain requirements and prohibitions relating to services provided by a school health care clinic. The bill also allows the FSSA to contract with a vendor to administer the clinic. It also requires the FSSA to report to the Health Finance Commission concerning the pilot project.

**Effective Date:** July 1, 2013.

**Explanation of State Expenditures:** *Summary:* This bill could increase FSSA expenditures to provide the school health care clinic pilot project. Based on four current grant recipients, if the FSSA were to contract out the implementation of a school-based clinic, state expenditures could increase between \$138,000 and \$500,000 annually. The FSSA estimates implementing the provisions of the bill will increase state expenditures by \$434,000 per site selected for participation in the pilot project. The actual cost of this bill will depend on decisions made by FSSA administrators with regard to how the pilot program is established.

FSSA is to report to the Health Finance Commission about the implementation of the pilot project before October 1, 2013.

Additional Information:

Because the bill is silent on specific requirements for the pilot project, costs of implementing the school health care clinic would depend on the operational schedule of the clinic (e.g., hours of operation, which days the clinic is open) as well as staff required to staff the clinic. The requirements of the bill could be met by operating the school health care clinic one day a month with an adequate amount of staff that is certified to provide preventive and acute health care services.

The FSSA reports they will contract out the requirement. Actual increases in state expenditures to implement the program will depend on the bids submitted by health professionals. The FSSA estimates implementing the pilot project could increase state expenditures by \$434,000 per participating site to cover costs of staff, supplies, equipment, and marketing.

Under the federal Affordable Care Act, a total of \$200 M was appropriated between FFY 2010 and FFY 2013 to support capital grants to improve and expand services at school-based health centers. There are four Indiana grant recipients under this program. It is not known if revenue received from these grants covered total operating expenses for the four school-based clinics.

<b>School</b>	<b>City</b>	<b>Grant Amount</b>
Madison County Community Health Center	Anderson	\$138,000
Community Hospitals Foundation	Indianapolis	\$499,945
Richmond Community Schools	Richmond	\$489,609
Vermillion-Parke Community Health Center	Clinton	\$350,552

**Explanation of State Revenues:**

**Explanation of Local Expenditures:**

**Explanation of Local Revenues:**

**State Agencies Affected:** FSSA.

**Local Agencies Affected:**

**Information Sources:** Christina Hage, FSSA.

**Fiscal Analyst:** Bill Brumbach, 232-9559.